

# DEPARTMENT OF THE AIR FORCE 59TH MEDICAL WING (AETC) JOINT BASE SAN ANTONIO - LACKLAND TEXAS



15 JUNE 2017

MEMORANDUM FOR SGOZ

ATTN: MAJ BRYANT J WEBBER

FROM: 59 MDW/SGVU

SUBJECT: Professional Presentation Approval

- 1. Your paper, entitled <u>Athletic Trainer Integration in U.S. Air Force Basic Training</u> presented at/published to <u>SURF 2017 (San Antonio TX, June 16, 2017)</u> in accordance with MDWI 41-108, has been approved and assigned local file #<u>17260</u>.
- 2. Pertinent biographic information (name of author(s) title, etc.) has been entered into our computer file. Please advise us (by phone or mail) that your presentation was given. At that time, we will need the date (month, day and year) along with the location of your presentation. It is important to update this information so that we can provide quality support for you, your department, and the Medical Center commander. This information is used to document the scholarly activities of our professional staff and students, which is an essential component of Wilford Hall Ambulatory Surgical Center (WHASC) internship and residency programs.
- 3. Please know that if you are a Graduate Health Sciences Education student and your department has told you they cannot fund your publication, the 59th Clinical Research Division may pay for your basic journal publishing charges (to include costs for tables and black and white photos). We cannot pay for reprints. If you are a 59 MDW staff member, we can forward your request for funds to the designated Wing POC at the Chief Scientist's Office, Ms. Alice Houy, office phone: 210-292-8029; email address: alice.houy.civ@mail.mil.
- 4. Congratulations, and thank you for your efforts and time. Your contributions are vital to the medical mission. We look forward to assisting you in your future publication/presentation efforts.

LINDA STEEL-GOODWIN, Col, USAF, BSC

Linda Steel-Goodwin

Director, Clinical Investigations & Research Support

# PROCESSING OF PROFESSIONAL MEDICAL RESEARCH/TECHNICAL PUBLICATIONS/PRESENTATIONS

## INSTRUCTIONS

# USE ONLY THE MOST CURRENT 59 MDW FORM 3039 LOCATED ON AF E-PUBLISHING

- 1. The author must complete page two of this form:
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  - b. In Section 2, there may be funding available for journal costs, if your department is not paying for figures, tables or photographs for your publication. Please state "YES" or "NO" in Section 2 of the form, if you need publication funding support.
- 2. Print your name, rank/grade, sign and date the form in the author's signature block or use an electronic signature.
- 3. Attach a copy of the 59 MDW IRB or IACUC approval letter for the research related study. If this is a technical publication/presentation, state the type (e.g. case report, QA/QI study, program evaluation study, informational report/briefing, etc.) in the "Protocol Title" box.
- 4. Attach a copy of your abstract, paper, poster and other supporting documentation.
- 5. Save and forward, via email, the processing form and all supporting documentation to your unit commander, program director or immediate supervisor for review/approval.
- 6. On page 2, have either your unit commander, program director or immediate supervisor:
  - a. Print their name, rank/grade, title; sign and date the form in the approving authority's signature block or use an electronic signature.
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- 9. Once your manuscript, poster or presentation has been approved for a one-time public release, you may proceed with your publication or presentation submission activities, as stated on this form. Note: For each new release of medical research or technical information as a publication/presentation, a new 59 MDW Form 3039 must be submitted for review and approval.
- 10. If your manuscript is accepted for scientific publication, please contact the 59 CRD/Publications and Presentations Section at 292-7141. This information is reported to the 59 MDW/CC. All medical research or technical information publications/presentations must be reported to the Defense Technical Information Center (DITC). See 59 MDWI 41-108, Presentation and Publication of Medical and Technical Papers, for additional information.
- 11. The Joint Ethics Regulation (JER) DoD 5500.07-R, Standards of Conduct, provides standards of ethical conduct for all DoD personnel and their interactions with other non-DoD entities, organizations, societies, conferences, etc. Part of the Form 3039 review and approval process includes a legal ethics review to address any potential conflicts related to DoD personnel participating in non-DoD sponsored conferences, professional meetings, publication/presentation disclosures to domestic and foreign audiences, DoD personnel accepting non-DoD contributions, awards, honoraria, gifts, etc. The specific circumstances for your presentation will determine whether a legal review is necessary. If you (as the author) or your supervisor check "NO" in block 17 of the Form 3039, your research or technical documents will not be forwarded to the 502 ISG/JAC legal office for an ethics review. To assist you in making this decision about whether to request a legal review, the following examples are provided as a guideline:

For presentations before professional societies and like organizations, the 59 MDW Public Affairs Office (PAO) will provide the needed review to ensure proper disclaimers are included and the subject matter of the presentation does not create any cause for DoD concern.

If the sponsor of a conference or meeting is a DoD entity, an ethics review of your presentation is not required, since the DoD entity is responsible to obtain all approvals for the event.

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If your travel is being paid for (in whole or in part) by a non-Federal entity (someone other than the government), a legal ethics review is needed. These requests for legal review should come through the 59 MDW Gifts and Grants Office to 502 ISG/JAC.

If you are receiving an honorarium or payment for speaking, a legal ethics review is required.

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NOTE: All abstracts, papers, posters, etc., should contain the following disclaimer statement:

"The views expressed are those of the [author(s)] [presenter(s)] and do not reflect the official views or policy of the Department of Defense

NOTE: All abstracts, papers, posters, etc., should contain the following disclaimer statement for research involving humans:

"The voluntary, fully informed consent of the subjects used in this research was obtained as required by 32 CFR 219 and DODI 3216.02\_AFI 40-402."

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"The experiments reported herein were conducted according to the principles set forth in the National Institute of Health Publication No. 80-23, Guide for the Care and Use of Laboratory Animals and the Animal Welfare Act of 1966, as amended."

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# Frainer Integration in U.S. Air Force Basic Athletic

Raid Fisher, EdD, ATC1; Shandra Esparza, EdD, ATC1; Bryant Webber, MD, MPH1; Mary Pawlak, MD, MPH1; Nathaniel Nys, MD1; Justa Tchandja, PhD1; Thomas Cropper, DVM, MPVM1; Sarah de la Motte, PhD, MPH, ATC3 IIs Faye Miler School of Nursing and Health Professions, University of the Incarnate Word, San Antonio, Texas; 3559th Medical Group, 59th Medical Wing, Joint Base San Antonio-Lackland, Texas; Performed Services Consortium for Health and Military Performance, Uniformed Services University of the Health Sciences, Bethesda, Maryland



# To assess the impact of embedded athletic trainers within basic military training on operational efficiency within the U.S. Air Force. PURPOSE

# RATIONALE AND SIGNIFICANCE

As a leading cause of morbidity among U.S. military members and trainees, musculoskeletal injuries have a major impact on both current and future operational readiness.1

U.S. Air Force Basic Military Training (BMT)

- The injury incidence density rate is 18.3 per 1,000 person-weeks (29.4 for females and 15.1 for males)<sup>2</sup>
- The injury period prevalence for the 7.5-week training course is 12.5%<sup>2</sup>
  - The stress fracture period prevalence is 1.0% (1.9% for females and 0.8% for males)<sup>3</sup>
- Nearly half (47%) of all medical attrition from training is attributed to a musculoskeletal injury<sup>2</sup>
- Injured trainees are 3.0 times (95% CI: 2.8, 3.2) as likely to be discharged as their non-injured peers?
- Injured trainees who graduate are 2.9 times (95% CI: 2.7, 3.0) as likely to graduate late as compared to their non-injured peers<sup>2</sup>
- Injuries incur \$21.8 million in direct and indirect costs annually, not including long-term disability costs<sup>2</sup>



The views expressed are those of the authors and do not reflect the official views or policy of the Department of Defense or its Components

# HYPOTHESES

Athletic trainers have been used by all U.S. military branches, although published data on their effectiveness are limited.<sup>4</sup> We hypothesized that embedded certified athletic trainers with sports medicine physician oversight would improve outcomes in Air Force BMT in attrition, get fit referrals, and reduced stress fracture rates.

# METHODS

Investigators from the 559 Medical Group and the Ila Faye Miller School of Nursing and Health Professions at the University of the Incarnate Word partnered to design a community intervention trial to test these hypotheses.

Medical Research Program's Fiscal Year 2014 Clinical Research Initiative Intramural Research Award on Military Training Injuries (award DM140461) for a 30 month intervention. After establishing a clinic in the 323<sup>rd</sup> training squadron with permission of the 737<sup>rh</sup> training wing we hired two full-time athletic trainers to provide musculoskeletal care to the trainees of the 323<sup>rd</sup> squadron self-reporting with pain. Rates of trainee attrition, on-time graduation, get-fit referrals, and stress fracture rates were tracked



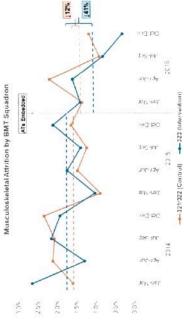
No proprietary information is being released to the public

# RESULTS

Preliminary Results for year 1

- Trainees
- Intervention 323<sup>rd</sup> squadron 7,619 trainees
- Control 321/22<sup>nd</sup> squadrons 11,695 trainees

	Intervention Control (323 TRS) (321/32	Control (321/322 TRS)	Intervention vs Ctrl RR (95% CI)
Overall Attrition	5.4%	%8'9	0.75 (0.71, 0.89)
Musculoskeletal Attrition	1.0%	1.3%	0.75 (0.57, 0.98)
Get Fit Referrals	1.5%	1.4%	1.08 (0.85, 1.37)
Stress Fracture Rate 2.42	2.42	2.87	0.84 (0.66, 1.08)



# CONCLUSIONS

Athletic training integration has effectively improved measures of operational efficiency in basic military training. Further significant impact is anticipated through the next two years of grant activity.

# Deference

- (1) MSMR 2016; 23(4):2-27
- (2) Nye et al, J Athl Training 2016; in press
- (3) Nye et al, Sports Health 2016 Mar 4; pii: 1941738116635558. [Epub ahead of print]
  - (4) Knapik et al, Epidemiological Report No. S.0007856-11, October 2012.